

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LINDSEY GRAHAM 2016

A. Full Name (Last, First, Middle Initial)

MANUEL R. VALLARINO

Mailing Address 320 N AZALEA DRIVE

City	State	Zip Code
SURFSIDE BEACH	SC	29575-5024

FEC ID number of contributing
federal political committee.

C

Name of Employer
VALLARINO CONSTRUCTION, LLC

Occupation
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Transaction ID : SA17.1199

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
03			03			2015			

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

B. Full Name (Last, First, Middle Initial)

MANUEL R. VALLARINO

Mailing Address 320 N AZALEA DRIVE

City	State	Zip Code
SURFSIDE BEACH	SC	29575-5024

FEC ID number of contributing
federal political committee.

C

Name of Employer
VALLARINO CONSTRUCTION, LLC

Occupation
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Transaction ID : SA17.71910

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			26			2015			

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

REDESIGNATION REQUESTED

C. Full Name (Last, First, Middle Initial)

STEPHEN E. E. VAN HORN

Mailing Address 305 RECTORY SQUARE

City	State	Zip Code
CAMDEN	SC	29020-2907

FEC ID number of contributing
federal political committee.

C

Name of Employer
KENNEDY INSURANCE

Occupation
OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : SA17.1061

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
03			05			2015			

CONTRIBUTION

Amount of Each Receipt this Period

1000.00

Subtotal Of Receipts This Page (optional).....

6400.00

Total This Period (last page this line number only).....